



# APPLICATION FOR EMPLOYMENT

## City of Los Altos

One North San Antonio Road, Los Altos, California 94022  
(650) 947-2765 Fax (650) 947-2731 www.ci.los-altos.ca.us

### AN EQUAL OPPORTUNITY EMPLOYER

FOR OFFICE USE ONLY

Date Received:

Answer all questions completely and accurately. Print in ink or use typewriter. Attach additional sheets if necessary. Incomplete applications may result in delay or disqualification.

POSITION APPLYING FOR: \_\_\_\_\_

#### PERSONAL

NAME: \_\_\_\_\_  
Last First Middle

Other names under which you have worked: \_\_\_\_\_

STREET ADDRESS or PO BOX: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PHONE: Home \_\_\_\_\_ Work \_\_\_\_\_ E-mail \_\_\_\_\_

SOCIAL SECURITY NO. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ HAVE YOU REACHED THE AGE OF 18? ☐ YES ☐ NO

Do you possess a valid drivers license? ☐ YES ☐ NO

Issuing State: \_\_\_\_\_ License No. \_\_\_\_\_ Class \_\_\_\_\_ (Standard is C)

Have you any relatives working for the City of Los Altos or who are on the City Council or City Commissions? ☐ YES ☐ NO

If yes, give name and relation: \_\_\_\_\_

Are you a citizen of the United States or do you have a legal right to work in the United States? ☐ YES ☐ NO

(Written proof of citizenship or right to work will be required at time of hire)

As an adult, have you ever been convicted of a felony or misdemeanor, or been on parole or probation as a result of a conviction? ☐ YES ☐ NO

If yes, list all convictions since your 18<sup>th</sup> birthday on an attached sheet. Include offense, date, and place of conviction. (A yes answer will **not** automatically disqualify you from appointment. However, misrepresentation of your conviction history will result in termination or refusal of employment.

Have you been discharged, forced to resign, or rejected during a probationary period from any employment within the last 10 years?

☐ YES ☐ NO

If yes, give name of employer, dates of employment, and reasons below. A yes answer does not necessarily exclude you from employment. Each case is given individual consideration based upon job relatedness.

#### EDUCATION AND TRAINING:

Check Appropriate Box if you possess one of the following: ☐ High School Diploma ☐ G.E.D.

Certificate

College: 1 2 3 4 Post Graduate Work \_\_\_\_\_ Years

Colleges, Universities, Vocational Technical Schools Attended	City/State	Dates Attended From To		Course of Study/Major	Degree or Certificate	Total Units Completed Semester Quarter	

If applicable to the position you are applying, indicate other special training, skills, languages, professional licenses or registrations you possess. \_\_\_\_\_

Clerical Skills: Typing: WPM \_\_\_\_\_ Office equipment: \_\_\_\_\_

**EMPLOYMENT HISTORY**

The following section must be filled out completely. Begin with your most recent position and account for all experience within the past 10 years, whether related to the position you are applying for or not. Voluntary, non-paid experience will be accepted if job-related. Use additional sheets if necessary. You may submit a resume or other supporting documentation if you wish, but that does not substitute for completion of this section. Do not write "see resume" in the "describe your duties" box.

Dates employed: From: Month/Yr.	To: Month/Yr.	Total: Yrs./Months	Hours per week:
Name of employer:		Phone (____)	
Address of employer:			
Your job title or occupation:		Salary: Beginning _____ Ending _____	
Number of people supervised:	Supervisor's name: _____ Title: _____		
Your duties & responsibilities:			
Reason for leaving:			

Dates employed: From: Month/Yr.	To: Month/Yr.	Total: Yrs./Months	Hours per week:
Name of employer:		Phone (____)	
Address of employer:			
Your job title or occupation:		Salary: Beginning _____ Ending _____	
Number of people supervised:	Supervisor's name: _____ Title: _____		
Your duties & responsibilities:			
Reason for leaving:			

Dates employed: From: Month/Yr.	To: Month/Yr.	Total: Yrs./Months	Hours per week:
Name of employer:		Phone (____)	
Address of employer:			
Your job title or occupation:		Salary: Beginning _____ Ending _____	
Number of people supervised:	Supervisor's name: _____ Title: _____		
Your duties & responsibilities:			
Reason for leaving:			

**EMPLOYMENT HISTORY CONT'D**

Dates employed: From: _____ Month/Yr.	To: _____ Month/Yr.	Total: _____ Yrs./Months	Hours per week: _____
Name of employer: _____		Phone (_____) _____	
Address of employer: _____			
Your job title or occupation: _____		Salary: Beginning _____ Ending _____	
Number of people supervised: _____	Supervisor's name: _____ Title: _____		
Your duties & responsibilities: _____ _____ _____ _____ _____			
Reason for leaving: _____			

Dates employed: From: _____ Month/Yr.	To: _____ Month/Yr.	Total: _____ Yrs./Months	Hours per week: _____
Name of employer: _____		Phone (_____) _____	
Address of employer: _____			
Your job title or occupation: _____		Salary: Beginning _____ Ending _____	
Number of people supervised: _____	Supervisor's name: _____ Title: _____		
Your duties & responsibilities: _____ _____ _____ _____ _____			
Reason for leaving: _____			

**AGREEMENT - READ CAREFULLY BEFORE SIGNING**

I hereby certify that all statements made in this application are true and I authorize investigation of all matters contained in this application. I agree and understand any misstatement or omission of material fact on this application will cause forfeiture on my part of all rights of employment with the City of Los Altos. I agree to furnish such proof of age, citizenship, licenses and education as may be requested; and I agree to undergo a physical examination by a City physician if a job offer is made and understand that employment is contingent upon meeting the City's physical job requirements. I further agree to be fingerprinted.

I understand that all offers of employment are conditioned upon satisfactory proof of identity and legal ability to work in the United States and that the City of Los Altos is legally required by the Federal Government to hire only U.S. citizens and aliens lawfully authorized to work in the United States.

I also authorize employers, schools or persons named in this application to give any information regarding my qualifications and character. I hereby release said employers, schools, persons and the City from any liability for damages for receiving or releasing information.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

The City will provide reasonable accommodation for qualified individuals with disabilities. To request an accommodation please contact the Human Resources Department at (650) 947-2765.

Return completed application to:  
Human Resources, City of Los Altos, One North San Antonio Road, Los Altos, CA 94022



# EMPLOYMENT QUESTIONNAIRE

## City of Los Altos

One North San Antonio Road, Los Altos, California 94022  
(650) 947-2765

The City of Los Altos is an Equal Opportunity Employer. We are required by the federal government to maintain certain statistical information on our job applicants and employees. To assist us with this, we would appreciate your **voluntary** cooperation in participating in this questionnaire. This form will be detached from your application and will be kept **confidential** and **separate** from any employment decision.

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

POSITION APPLYING FOR: \_\_\_\_\_

SEX: ☐ FEMALE ☐ MALE

ARE YOU AGE 40 OR OLDER? ☐ YES ☐ NO

**Ethnic Background:** Check **one** box. Persons of mixed origins should classify themselves according to the ethnic background with which they identify:

- ☐ White (not of Hispanic origin): all persons in any of the original peoples of Europe, North Africa, or the Middle East.
- ☐ Black (not of Hispanic origin): all persons having origins in any of the Black racial groups of Africa.
- ☐ Hispanic: all persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.
- ☐ Asian or Pacific Islander: all persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands. This area includes, for examples, China, Japan, Korea, the Philippine Islands, and Samoa.
- ☐ American Indian or Alaskan Native: all persons having origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation or community recognition.

### RECRUITMENT SURVEY

I learned of this position through the following sources (check as many boxes as apply):

- |  |   |
|--|---|
| 1. <input type="checkbox"/> Newspaper _____                            | 5. <input type="checkbox"/> Word-of-mouth                           |
| 2. <input type="checkbox"/> City of Los Altos printed job announcement | 6. <input type="checkbox"/> City employee                           |
| 3. <input type="checkbox"/> Los Altos City Website                     | 7. <input type="checkbox"/> City of Los Altos Telephone Job Hotline |
| 4. <input type="checkbox"/> Internet site _____                        | 8. <input type="checkbox"/> Other _____                             |

*Thank you for your interest in employment with the City of Los Altos.*